

TRANSMITTAL SHEET FOR
NOTICE OF INTENDED ACTION

Control 580 Department or Agency Alabama Department of Mental Health

Rule No. 580-2-9-.18

Rule Title: Residential Services

 New X Amend Repeal Adopt by Reference

Would the absence of the proposed rule significantly harm or endanger the public health, welfare, or safety? YES

Is there a reasonable relationship between the state's police power and the protection of the public health, safety, or welfare? NO

Is there another, less restrictive method of regulation available that could adequately protect the public? NO

Does the proposed rule have the effect of directly or indirectly increasing the costs of any goods or services involved and, if so, to what degree? NO

Is the increase in cost, if any, more harmful to the public than the harm that might result from the absence of the proposed rule? NO

Are all facets of the rulemaking process designed solely for the purpose of, and so they have, as their primary effect, the protection of the public? YES

Does the proposed action relate to or affect in any manner any litigation which the agency is a party to concerning the subject matter of the proposed rule? NO

Does the proposed rule have an economic impact? NO

If the proposed rule has an economic impact, the proposed rule is required to be accompanied by a fiscal note prepared in accordance with subsection (f) of Section 41-22-23, Code of Alabama 1975.

Certification of Authorized Official

I certify that the attached proposed rule has been proposed in full compliance with the requirements of Chapter 22, Title 41, Code of Alabama 1975, and that it conforms to all applicable filing requirements of the Administrative Procedure Division of the Legislative Services Agency.

Signature of certifying officer Debbie Popwell

Date 12/19/19

REC'D & FILED

DEC 19 2019

(DATE FILED)
(STAMP)

LEGISLATIVE SVC AGENCY

Alabama Department of Mental Health

NOTICE OF INTENDED ACTION

AGENCY NAME: Alabama Department of Mental Health

RULE NO. & TITLE: 580-2-9-.18 Residential Services

INTENDED ACTION: Amend

SUBSTANCE OF PROPOSED ACTION: We have created Chapter 580-2-20 to eventually combine the current rules for Mental Illness in Chapter 580-2-9 and Substance Abuse in Chapter 580-9-44.

TIME, PLACE, MANNER OF PRESENTING VIEWS: All interested persons may submit data, views, or arguments in writing to Debbie Popwell, Director, Office of Certification Administration, Alabama Department of Mental Health, 100 North Union Street, Suite 540, Montgomery, Alabama 36130 by mail or in person between the hours of 8:00AM and 5:00PM, Monday through Friday, or by electronic means to Debbie.popwell@mh.alabama.gov until and including March 6, 2020. Persons wishing to submit data, views, or arguments orally should contact Ms. Popwell by telephone at (334) 353-2069 during this period to arrange for an appointment.

FINAL DATE FOR COMMENT AND COMPLETION OF NOTICE:
March 6, 2020

CONTACT PERSON AT AGENCY:

Persons wishing a copy of the proposal may contact
Debbie Popwell
Department of Mental Health
100 North Union Street, Suite 540
Montgomery, Alabama 36130
(334) 353-2069

A copy of the proposed change is available on the department's website at <http://mh.alabama.gov>. Click on Provider Portal and then Certification to find code with changes.



(Signature of officer authorized
to promulgate and adopt
rules or his or her deputy)

580-2-9-.18 Residential Services. Sections 580-2-9-.18(1) through 580-2-9-.18(27) apply to any residential setting that provides congregate living and dining to consumers. Sections 580-2-9-.18(28) through 580-2-9-.18(38) apply to specific types of residential care.

(1) All residential programs certified under this section shall have program descriptions approved by the board as specified in 580-2-9-.08(10)(b). The program descriptions shall address the following:

(a) Staffing pattern of the home consistent with staffing requirements as set forth in sections 580-2-9-.18(28) through 580-2-9-.18(38).

(b) Type of the program to include:

1. The number of beds.
2. Services to be provided.
3. Population served.
4. Expected length of stay.
5. Expected outcomes.

(c) Staff qualifications consistent with requirements set forth in sections 580-2-9-.18(28) through 580-2-9-.18(38) for each type of residential program certified.

(d) Discharge/transfer criteria and procedures.

(e) Service area for the program.

(f) Admission criteria shall include the following inclusionary criteria:

1. Require the consumer's willingness to participate in daily structured activities.

2. Require a principal psychiatric diagnosis.

3. Require a setting that has staff on the premises 24 hours/day when consumers are present and a combination of the following criteria, whose severity would preclude treatment in a less restrictive environment:

(i) Impaired contact with reality manifested by hallucinations, delusions, or ideas of reference.

- (ii) Withdrawal, regression, or confusion not warranting inpatient hospitalization.
- (iii) Moderate to severe disabling depression.
- (iv) Moderate to severe disabling anxiety.
- (v) Disabling somatic symptoms.
- (vi) Poor medication compliance.
- (vii) Inpatient care is not warranted.
- (viii) Poor socialization skills.
- (ix) Inappropriate attention-seeking behaviors.
- (x) Poor interpersonal skills.
- (xi) Inadequate problem solving skills.
- (g) Exclusionary criteria must include the following:

1. Principal diagnosis of alcoholism or drug dependence.
2. Primary physical disorder (serious illness requiring hospital care, nursing care, home health care, or impaired mobility that prohibits participation in program services).
3. Primary organic disorder (brain damage).
4. Principal diagnosis of mental retardation.

(h) The program description should indicate that the following services, at a minimum should be either provided in-house or arranged for by the residential staff, depending upon the needs of the individual consumer:

1. Assistance in applying for benefits.
2. Assistance in improving social and communication skills.
3. Assistance with medication management.
4. Assistance in the development of basic living skills (money management, laundering, meal preparation, shopping, transportation, house cleaning, personal hygiene, nutrition, and health and safety).

5. Vocational services.
6. Community orientation.
7. Recreation and activities.
8. Assistance in locating long term community placement in least restrictive setting.
9. Transportation to and from necessary community services and supports.
10. Education about psychiatric illness.
11. Family support and education.
12. The program description for adult therapeutic group home must include at a minimum the provision of Intensive Day Treatment services within the home.
13. The program description for a crisis residential program must include the provision of Partial Hospitalization Program services within the facility.
14. The program description for a child/adolescent residential program must include a description of how the child/adolescent shall continue to receive appropriate education while in the program.
 - (i) The program description addresses a procedure for referral to the appropriate resource (DHR, Probate Court, etc.) for those consumers who may need a legal guardian while residing in the program.
 - (2) Residential facilities, with the exception of apartments, shall demonstrate on-site staff coverage 24 hours a day, 7 days per week as indicated by staff duty rosters.
 - (3) The personnel records of all residential staff have current certification for First Aid and CPR from an authorized certifying agency. Staff are trained prior to working alone with consumers.
 - ~~(4) ————— There is documentation that all residential staff have received training in infection control and prevention prior to working with consumers and annually thereafter. There is documentation that consumers have received infection control training at the time of admission and annually thereafter.~~
 - (5) There is documentation that all residential staff who transport consumers have a current driver's license valid in Alabama. The license shall be appropriate for the type of

vehicle operated by the driver.

(6) Consumers admitted to each type of residential program meet the admission criteria as specified above, and consumer records verify that admission criteria were met.

(7) The majority of residential staff of a home serving primarily consumers who are deaf shall hold at least Intermediate Plus level fluency in Sign Language as measured by the Sign Language Proficiency Interview (SLPI) with at least one fluent person per shift. Staff providing clinical services shall have an Advanced proficiency. Non-signing staff will engage in on the job training to learn American Sign Language.

(8) Consumers admitted to each type of residential program do not meet exclusionary criteria as specified above.

(9) Residential programs shall provide or arrange access to a wide range of services. The following services, at a minimum, should be either provided in-house or arranged for by the residential staff, depending upon the needs of the individual consumer:

- (a) Assistance in applying for benefits.
- (b) Assistance in improving social and communication skills.
- (c) Assistance with medication management.
- (d) Assistance in the development of basic living skills (money management, laundering, meal preparation, shopping, transportation, house cleaning, personal hygiene, nutrition, and health and safety).
- (e) Vocational services.
- (f) Community orientation.
- (g) Recreation and activities.
- (h) Assistance in locating long term community placement in least restrictive setting.
- (i) Transportation to and from necessary community services and supports.
- (j) Education about psychiatric illness.
- (k) Family support and education.
- (l) Monthly/weekly schedule of activities and

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consumer/staff member interview confirm that the appropriate services are being access or provided to consumers of residential services.

(m) The consumers' records indicate that the required services are being provided.

(n) The consumers' records indicate that the provision of communication access for people who are deaf is consistent with programming offered by the home.

(10) The residential program will provide each consumer a variety of 3 nutritious meals plus snacks per day 7 days per week as evidenced by weekly menus approved by a nurse, nutritionist, or dietician. (Exception: Consumers served a meal at another location).

(11) There are policies and procedures designed to assure that meals are nutritious, offer a variety of foods, and reflect consumer preferences to the extent possible. There are policies and procedures to assure that consumers who are involved in activities outside of the home during meal times get a meal.

(12) There is a policy that requires provision of special diets as prescribed by a physician.

(13) There is a policy stating that staff shall not serve as the legal guardian for consumers of the residential facility.

(14) All filled prescriptions controlled by staff of residential facilities must be stored in a locked cabinet or other substantially constructed storage area that precludes unauthorized entry. There must be a written policy that medication cabinets be locked when not in use.

(15) There shall be a written policy regarding disposition of unused medication in residential programs in accordance with Alabama Board of Pharmacy and federal Environmental Protection Agency guidelines.

(16) There must be written procedures for handling the disruptive behavior of consumers. Staff shall be trained in these procedures. Such procedures shall include:

(a) Access to agency backup staff and appropriate community personnel.

(b) If incarceration is necessary, the following procedures are required, or documentation why, in an individual case, they could not be implemented:

1. Face-to-face contact by a mental health

professional either prior to or within 2 hours of incarceration.

2. A staff member inform the jail/detention center of the consumer's medication and offer to bring medication to the jail/detention center.

3. Regular visits by a staff member during incarceration unless it is considered to be non-therapeutic or is not permitted by the jail/detention center and is so documented in the consumer's record.

4. If the consumer is on temporary visit status, the state hospital will be notified within 24 hours.

5. The emergency contact will be notified within 24 hours.

(17) There is a policy that consumers will not be discharged solely on the basis of one positive urine analysis showing the presence of alcohol, illegal drugs, or medication not prescribed.

(18) At the time of admission, the provider will secure a written agreement with the consumer, family member, placing agency, or significant other indicating who will be responsible for medical and dental expenses.

(19) All residential programs must demonstrate their consumer's accessibility to a local licensed hospital for the purpose of providing emergency hospital care.

(20) Residential programs will assist consumers in obtaining necessary medical care.

(21) First aid supplies in the type and quantity approved by a registered nurse or a pharmacist shall be kept in a readily accessible location for all shifts and will be restocked upon use.

(22) There shall be adequate room for private visits with relatives and friends, for small group activities, and for social events and recreational activities. In homes occupied by consumers who are deaf, an adaptive telecommunication device must be present in order to allow the consumer to make and receive telephone calls.

(23) Radios, television, books, current magazines and newspapers, games, etc. shall be available for consumers. In homes occupied by deaf consumers, televisions will have working closed-caption decoders and such decoders will be turned on.

(24) In the case of an unexpected or unexplained death, the provider will:

(a) Report the death to the Department of Mental Health as soon as possible but at least within 24 hours.

(b) Request the local police or sheriff to conduct an investigation.

(c) Report the death to the County Medical Examiner or assure that the death is reported to the County Medical Examiner.

(25) If the provider uses residential beds for respite services (also known as crisis respite), the following criteria must be met:

(a) There are written admission, expected length of stay, and continued stay criteria.

(b) There is a written screening/referral protocol.

(c) Services provided and documented must be appropriate to meet the identified needs of each person admitted for crisis respite services.

(d) The beds must be in a program certified under section 580-2-9-.18. Programs where all beds are used for crisis residential services must meet the requirements as set forth in 580-2-9-.18(1) through 580-2-9-.18(28) and 580-2-9-.18(35).

(26) The capacity of each type of residential program shall not exceed 10 except in cases where a waiver is recommended by the Associate Commissioner for Mental Illness and approved by the Commissioner based upon the presence of a compensating advantage to the residents in increased privacy and personal space. Programs in excess of a capacity of 10 and/or that have more than 2 residents per bedroom that have been previously certified are eligible to continue to be certified at the existing capacity and bedroom occupancy at the existing location so long as compliance with all their applicable standards is maintained. If a previously certified program with a capacity greater than 10 and/or with more than two residents per bedroom changes location, the new location cannot exceed a capacity of 10 and cannot have more than 2 residents per bedroom unless a waiver of this regulation, applied for in writing, is granted by the Commissioner of DMH.

(27) There shall be written program rules developed in accordance with the following principles.

(a) Program rules shall be developed with documented active participation of consumers and staff.

(b) Program rules shall promote individual responsibility and prohibit rules for staff convenience and rules

based on one person's behavior.

(c) Program rules shall be based on the Rights Protection and Advocacy guidelines for consumer rights and responsibilities.

(d) Program rules shall address the following areas, at a minimum.

1. Visitation hours.
2. Sign in/out requirements.
3. Curfew.
4. Sexual contact on provider/facility property which respect consumer's dignity, privacy, and need for social interaction with others.
5. Supervised access to the kitchen for health and safety reasons.
6. Possession and consumption of legal and illegal substances.
7. Possession of weapons.

(e) Program rules shall provide for resolution of disputes on an individual basis. When necessary, adjustments should be made to the treatment plan.

(f) Program rules shall make clear the consequences when rules are not followed.

(g) Program rules shall limit chores to those necessary to maintain personal and treatment areas and prohibit using consumers for other duties, unless the consumer chooses to perform those duties and is compensated fairly.

(h) Application of the rules and consequences will be fair, consistent, and recognize extenuating circumstances.

(28) An adult small capacity (3-bed) residential home must meet the following criteria:

(a) The program coordinator shall have a bachelor's degree in a mental health service related field and shall have 2 years experience in a direct service area. Alternatively, the coordinator shall have 3 years experience in a mental illness residential setting, demonstrate the ability to communicate clearly orally and in writing, and demonstrate the ability to maintain clinical records in accordance with standards.

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(b) All staff have received initial and at least annual training related to the special needs of the population served.

(c) The program has the following staffing pattern:

1. Day Shift - 1 Program Coordinator (5 days per week) and 1 Mental Health Worker (2 days per week).
2. Evening Shift - 1 Mental Health Worker (7 days per week).
3. Night Shift - 1 Mental Health Worker (7 days per week, awake).

(d) The program shall provide specialized services that are based on the admission criteria contained in the program description.

(29) An adult residential care home must meet the following criteria:

(a) The program coordinator shall have a bachelor's degree in a mental health related field and 2 years experience in a direct service functional area.

(b) All staff have received initial and at least annual training related to the special needs of the population served.

(c) The program has the following staffing pattern:

1. Day Shift - 1 BA (5 days per week), .25 secretary/aide (5 days per week), and 1 Mental Health Worker (2 days per week).
2. Evening Shift - 1 Mental Health Worker (7 days per week).
3. Night Shift - 1 Mental Health Worker (7 days per week, night shift can sleep).

(d) The program shall provide specialized services that are based on the admission criteria contained in the program description.

(30) An adult residential care home with specialized basic services must meet the following criteria:

(a) The program coordinator shall have a bachelor's degree in a mental health related field and 2 years experience in a direct service functional area.

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(b) All staff shall receive initial and at least annual training related to the special needs of the population served.

(c) The program shall provide specialized services that are based on the admission criteria contained in the program description.

(d) The program has the following staffing pattern for a 10 bed home:

1. Day shift - 1 BA (5 days per week), .25 secretary/aide (5 days per week), and 1 Mental Health Worker (2 days per week).
2. Evening shift - 1 Mental Health Worker (7 days per week).
3. Night shift - 1 Mental Health Worker (7 days per week, awake).

(e) The program has the following staffing pattern for a 16 bed home:

1. Day Shift - 1 BA (5 days/week), .25 secretary/aide (5 days/week), and 1 Mental Health Worker (7 days/week).
2. Evening Shift - 1 Mental Health Worker (7 days/week).
3. Night Shift - 1 Mental Health Worker (7 days/week, awake).

(31) An adult residential care home with specialized medical services must meet the following criteria:

(a) The program coordinator shall be a registered nurse.

(b) All staff shall receive initial and at least annual training related to the special needs of the population served.

(c) The program shall provide specialized services that are based on the admission criteria contained in the program description.

(d) The program has the following staffing pattern for a 10 bed home:

1. Day shift - 1 registered nurse (7 days per week), .25 secretary/aide (5 days per week), and 1 Mental Health Worker (7 days per week).

2. Evening shift - 1 licensed practical nurse and 1 Mental Health Worker (7 days per week).

3. Night shift - 1 licensed practical nurse and 1 Mental Health Worker (both 7 days per week, both awake).

(e) The program has the following staffing pattern for a 16 bed home:

1. Day Shift - 2 Registered Nurses (7 days/week), .25 secretary/aid (5 days/week), 1 Mental Health Worker (7days/week).

2. Evening Shift - 1 Licensed Practical Nurse and 2 Mental Health Workers (7days/week).

3. Night Shift - 1 Licensed Practical Nurse and 1 Mental Health Worker (7 days/week, both awake).

(32) An adult residential care home with specialized behavioral services must meet the following criteria:

(a) The program coordinator shall have a bachelor's degree in a mental health related field and 2 years experience in a direct service functional area.

(b) All staff shall receive initial and at least annual training related to the special needs of the population served.

(c) The program shall provide specialized services that are based on the admission criteria contained in the program description.

(d) The program has the following staffing pattern for a 10 bed home:

1. Day shift - 1 BA (5 days per week), .25 secretary/aide (5 days per week), and 2 Mental Health Worker (2 days per week).

2. Evening shift - 2 Mental Health Workers (7 days per week).

3. Night shift - 2 Mental Health Workers (7 days per week, both awake).

(e) The program has the following staffing pattern for a 16 bed home:

1. Day Shift - 1 BA (5day/week), .25 secretary/aide (5days/week), 1 Mental Health Worker 5 days/ week, and 2 Mental Health Workers (2 days/week).

2. Evening Shift - 2 Mental Health Workers
(7days/week).

3. Night Shift - 2 Mental Health Workers (7days/week,
both awake).

(33) An adult therapeutic group home must meet the
following criteria.

(a) The program coordinator shall have a master's
degree in a mental health related field and at least 2 years post
master's experience in a direct service position.

(b) The program shall provide specialized services
that are based on the admission criteria contained in the program
description and must include at a minimum the provision of
intensive day treatment services within the home.

(c) All staff shall receive initial and at least
annual training related to the special needs of the population
served.

(d) The program has the following staffing pattern for
a 10 bed home:

1. Day shift - 1 MA (5 days per week), 2 BA (7 days
per week), .5 secretary/aide (5 days per week).

2. Evening shift - 1 Mental Health Worker (7 days per
week).

3. Night shift - 1 Mental Health Worker (7 days per
week, awake).

(e) The program has the following staffing pattern for
a 16 bed home:

1. Day Shift - 1 MA (5 days per week), 2 BA (7 days
per week), .5 secretary/aide (5 days per week).

2. Evening shift - 1 Mental Health Worker (7 days per
week).

3. Night shift - 1 Mental Health Worker (7 days per
week, awake); Assigned as need - 1 Mental Health Worker
(7days/week) assigned as deemed appropriate by the program based
on residents' needs.

(34) An Intermediate Care Program must meet the
following criteria:

(a) The program coordinator shall have a master's degree in a mental health related field and at least 2 years experience post-master's in a direct service position or be a registered nurse with at least 2 years of psychiatric inpatient experience.

(b) The program shall provide specialized services that are based on the admission criteria contained in the program description and must include at a minimum the provision of partial hospitalization services within the home.

(c) All staff shall receive initial and at least annual training related to the special needs of the population served.

(d) Admissions will be drawn primarily from persons referred from state psychiatric hospitals.

(e) The expected length of stay is 3 months unless an extension is clinically justified, but no more than 6 months.

(f) A psychiatrist shall make daily rounds Monday through Friday and shall be on call 7 days per week.

(g) The program has the following staffing pattern for 16 beds:

1. Day Shift - .5 Psychiatrist (includes on-call time), 1 MA (5 days/week), 1 Registered Nurse (5 days/week), 1 BA (5 days/week), 1 secretary/aide (5 days/week), 1 LPN (7 days/week), and 2 Mental Health Workers (7 days/week) where either the MA position or the Registered Nurse may be the program coordinator.

2. Evening Shift - 1 Licensed Practical Nurse and 2 Mental Health Workers (7 days/week); Night Shift - 1 Licensed Practical Nurse and 2 Mental Health Workers (7 days/week, all awake).

(35) A crisis residential program must meet the following criteria for 10 or less beds:

(a) The program coordinator shall have a master's degree in a mental health related field and 2 years post master's experience in a direct service functional area or be a registered nurse with 2 years of psychiatric inpatient experience.

(b) The program shall provide specialized services that are based on the admission criteria contained in the program

description and must include partial hospitalization services provided within the facility.

(c) A psychiatrist shall make daily rounds 5 days per week and shall be on call 7 days per week.

(d) All staff shall receive initial and at least annual training related to the special needs of the population served.

(e) The program has the following staffing pattern:

1. Day shift - .25 psychiatrist, 1 MA (7 days per week), 1 BA (5 days per week), 1 RN (5 days per week), and 1 secretary/aide (5 days per week).

2. Evening shift - 1 MA (5 days per week), 1 LPN, and 1 Mental Health Worker (both 7 days per week).

3. Night shift - 1 LPN and 1 Mental Health Worker (both 7 days per week, both awake).

(f) The expected length of stay is 2 weeks or less.

(g) The crisis residential program must also meet the standards for Designated Mental Health Facilities.

(36) A Psychiatric Assessment Center must meet the following criteria:

(a) The program shall provide specialized services that are based on the admission criteria in the program description.

(b) The program coordinator shall have a Master's degree in a mental health related field and 2 years post-Master's experience in a direct service functional area or be a Registered Nurse with 2 years of psychiatric inpatient experience.

(c) The program has the following staffing pattern for a maximum of 10 beds:

1. Day shift - .25 psychiatrist, 1 MA or RN Coordinator (5 days per week), 1 RN or LPN (7 days per week), 1 Clerical/Aide (5 days per week), 1 Mental Health Worker (7 days per week).

2. Evening Shift - 1 RN or LPN (7 days per week), 1 Mental Health Worker (7 days per week).

3. Night Shift - 1 RN or LPN (7 days per week), 1 Mental Health Worker (7 days per week).

(d) A psychiatrist shall make daily rounds 5 days per week and shall be on call 7 days per week.

(e) Adequate Intensive Case Management will be available within the organization to facilitate discharge planning and diversion from hospitalization in a state hospital.

(f) All staff shall receive initial and at least annual training related to the needs of the population served.

(g) The expected length of stay shall be no more than 4 days.

(37) A child/adolescent program must meet the following criteria:

(a) The program coordinator shall have a master's degree in a mental health related field and shall have at least 2 years post master's experience in a direct service functional area. One of the two years post master's experience must be with children/adolescents.

(b) Children/adolescents shall continue to receive an appropriate education while in the residential program. Children and adolescents shall receive 6 hours of education each day unless modified by an Individual Education Program. If the educational program is provided by the residential program, it must be registered with the State Department of Education. If the program is receiving special education funds, the program must agree to meet the minimum assurance statements set forth by the State Department of Education.

(c) All staff shall receive initial (before working alone with consumers) and 20 hours of annual training related to the target population with 2 of those 20 hours involving the perspective of families and consumers with regard to residential treatment.

(d) The frequency and intensity of treatment interventions must be specified in the individual treatment plans. Individual service elements must meet the applicable criteria in the Outpatient Service standards.

(e) The treatment plans are consistent with the admission criteria.

(f) The child/adolescent will be assessed for special education services. Once assessed, if the child/adolescent is determined to qualify for Special Education services, an Individualized Education Plan (IEP) is developed and a copy is placed in the clinical record.

(g) If a child/adolescent has an IEP, it shall be followed while in residential care including any updates. The legal guardian shall be informed of any meeting regarding an update or alteration in the child/adolescent's IEP.

(h) Children/adolescents shall receive at least 1 hour of individual therapy and 1 hour of group therapy each week. There is documentation that there are no more than 10 consumers in each group therapy session.

(i) The clinical backgrounds of the children and adolescents should be considered when room assignments are made.

(j) Thirty days prior to discharge the residential facility will begin coordinating recommended transitional services.

(k) Upon discharge, with the permission of the personal representative/legal guardian, the facility will set up appointments for the child/adolescent for all recommended follow-up services.

(l) Upon discharge, the personal representative/legal guardian will be given a list of all medications given during the residential stay and an explanation for why they were prescribed and the reason for discontinuation, if applicable.

(38) The Transitional Age Residential Care Program (age 17-25) must meet the following criteria:

(a) The Program Coordinator shall have either a Bachelor's degree in a mental health related field or be a Registered Nurse and have at least 2 years post-degree experience in a direct service functional area. One of the two years post-degree experience must be with adolescents/youth.

(b) Consumers shall continue to receive educational services while in the residential program, if deemed appropriate based upon an assessment of educational needs and age. School-age consumers shall receive 6 hours of education each day unless modified by an Individual Education Program (IEP). If the educational program is provided by the residential program, it must be registered with the State Department of Education. If the program is receiving special education funds, the program

must agree to meet the minimum assurance statements set forth by the State Department of Education.

(c) The consumer's IEP shall be followed and updated as needed while in residential care, including providing access to special needs services. The consumer and/or personal representative shall be informed of any meeting regarding an update or alteration in the consumer's IEP.

(d) All staff shall receive initial training (before working alone with consumers) and 20 hours of annual training related to the target population with 2 of those hours involving the perspective of families and consumers with regard to residential treatment.

(e) The program shall provide specialized services that are based on the essential service components and the admission criteria contained in the program description. Custody must be verified through the admission process, if applicable.

(f) The frequency and intensity of treatment interventions must be specified in the individual treatment plans. Individual service elements must meet the applicable criteria in the Outpatient Service standards.

(g) The treatment plans are consistent with the admission criteria.

(h) The consumers shall receive at least 1 hour of individual therapy and 1 hour of group therapy each week. There is documentation that there are no more than 10 consumers in each group therapy session.

(i) The clinical backgrounds of the consumers should be considered when room assignments are made.

(j) Thirty days prior to discharge the residential facility will begin coordinating recommended transitional services.

(k) Upon discharge with the permission of the consumer and/or personal representative/legal guardian, the program shall set up appointments for the consumer for all recommended follow-up services.

(l) Upon discharge, the consumer and/or personal Representative/legal guardian will be given a list of all medications given during the residential stay and an explanation for why they were prescribed and the reason for discontinuation, if applicable.

(m) The program has the following staffing pattern for 10 beds:

1. Day Shift - 1 BA/RN Program Coordinator (5 days per week), .25 clerical/aide (5 days per week), 1 BA Case Manager (7 days per week), and 1 Mental Health Worker (7 days per week).

2. Evening Shift - 2 Mental Health Workers (7 days per week); Night Shift - 2 Mental Health Workers (7 days per week with at least 1 awake)

(n) Admissions will be drawn primarily from persons referred from state psychiatric hospitals.

(39) A Medication/Observation/Meals Program is exempt from the following general residential standards in this section (1)(f)1., (9)(1) and (m), (10), (11), (12), (22), (23), (26), and (27) and must meet the following criteria:

(a) The program coordinator shall have a bachelor's degree in a mental health related field and 2 years experience in a direct service functional area.

(b) All staff shall receive initial and at least annual training related to the special needs of the population served.

(c) The program shall provide specialized services that are based on the admission criteria contained in the program description. The program description shall specifically address provisions for the following core services: meals, observation, and medication.

(d) Residents shall be provided choice to what degree, if any, they wish to participate in on-site activities.

(e) Outpatient Services such as psychiatry, nursing, and therapy services shall be delivered on-site.

(f) The program has the following staffing pattern for a 20 bed dwelling:

1. Day shift - 1 BA Coordinator (5 days per week), .1 full-time equivalent psychiatrist, .1 full-time equivalent MA therapist, and .1 full-time equivalent registered nurse, and 1 Mental Health Worker (7 days per week).

2. Evening shift - 1 Mental Health Worker (7 days per week).

3. Night Shift - 1 Mental Health Worker (7 days per week, awake).

(g) Living units shall be exclusively for the target population and shall be communally located with 24/7 on-site awake staff.

(h) The number of living units located at one site shall not exceed 30 unless approved by the Department of Mental Health.

Author: Division of Mental Illness, DMH

Statutory Authority: Code of Ala. 1975, §22-50-11.

History: **New Rule:** Filed June 14, 2010; effective July 19, 2010. Amended: Filed December 19, 2019.